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CONFIRMATION NO. 2820

SERIAL NUMBER 10/791,259	FILING OR 371(c) DATE 03/02/2004 RULE	CLASS 430	GROUP ART UNIT 1709	ATTORNEY DOCKET NO. H1547
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**APPLICANTS**

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**\*\* CONTINUING DATA****\*\* FOREIGN APPLICATIONS****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 05/24/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after		
Verified and Acknowledged	<i>E. Abraham</i> <i>EA</i> Examiner's Signature Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
CA	3	20	2

**ADDRESS**

45305

**TITLE**

Lithography mask utilizing asymmetric light source

FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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